Sudan

Although the security situations in the Darfur states, Blue Nile State and South and West Kordofan states improved in 2017, humanitarian needs in the Sudan remain significant, with children affected by epidemics and forced displacement due to conflicts and natural disasters. In addition to the protracted emergencies, the Sudan has been experiencing continued influx of refugees from South Sudan, the early outbreak of acute watery diarrhoea in two states and recent armed conflict in Jebel Marra. Across the country, some 4.4 million people, including 2.6 million children, are in urgent need of water, sanitation and hygiene (WASH) support, which is key to preventing future outbreaks of acute watery diarrhoea and other epidemics. Improvements in humanitarian access to conflict-affected areas in Jebel Marra and Blue Nile State have revealed the need for a multi-sector response to address the malnutrition crisis. The out-of-camp refugee settlements in the five states bordering South Sudan, as well as North Darfur and Khartoum, are also in urgent need of child protection, education, nutrition and WASH services.

Humanitarian strategy

UNICEF’s approach is aligned with the Sudan’s Multi-Year Humanitarian Strategy 2017-2019, Humanitarian Response Plan (HRP) 2018 and Integrated Strategic Framework 2017-2019. In addition to service delivery focusing on vulnerable children affected by conflict, epidemics and natural disasters, UNICEF’s approach is to strengthen linkages between humanitarian, development and peacebuilding efforts in the context of chronic poverty and underdevelopment. UNICEF, along with partners, is implementing an integrated child protection, education, health, nutrition and WASH response, also investing in community resilience and sustainable peace. Working with government, humanitarian and private sector partners, UNICEF is providing lifesaving support to vulnerable children in Jebel Marra, Blue Nile and South/West Kordofan. To prevent epidemics, including acute watery diarrhea, UNICEF and partners are expediting co-planning efforts and integrated response in high-risk hotspots. A key focus is on increasing accountability to affected populations, including by involving affected people in decisions that impact their lives. UNICEF is also advocating with the Government to develop and strengthen social protection policies to prevent and reduce humanitarian need. UNICEF continues to provide leadership for the coordination of the education, nutrition and WASH sectors, as well as the child protection.

Results from 2018

As of April 2018, UNICEF had US$24.1 million available against the US$115.1 million appeal (21 per cent funded). Since the beginning of the year to 30 April 2018, UNICEF and partners supported the response to the refugee influx, outbreak of acute watery diarrhoea and complex emergency response in and around the newly accessible areas. With UNICEF support, 66,548 people, including 32,000 children, gained access to an improved drinking water source. 251,351 children (under 5 years) accessed integrated management of childhood illness (IMCI) services. UNICEF reached over 157,000 people with primary health care services. A total of 48,696 children aged 6 to 59 months and severe acute malnutrition (SAM) were admitted for treatment. 2,465 unaccompanied and separated internally displaced and refugee children were reunited with their families or placed in alternative care arrangements. As part of the action plan to protect children from grave violations, the United Nations and the Government of the Sudan signed a Standard Operating Procedure on the release and hand over of children associated with armed groups. Funding constraints led to limited emergency education activities, only 8,638 school-aged children, out of the 99,080 targeted, gained access to safe learning spaces in first quarter of the year.
### Funding requirements

In line with the Sudan 2018 Humanitarian Response Plan (HRP) published in March 2018, UNICEF has increased its appeal from US$96.5 million to US$115.1 million to meet the humanitarian needs of women and children in the country for 2018. Without adequate, timely and flexible funding, UNICEF will be unable to provide life-saving support, respond to the continuing nutrition crisis and reach the most vulnerable children with critical health and WASH services. Basic supplies for primary education are also urgently needed.

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Original 2018 HAC Requirement (US$)</th>
<th>Revised 2018 HAC Requirement (US$)</th>
<th>Funds Available (US$)</th>
<th>Funding Gap (US$)</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>24,886,896</td>
<td>35,305,681</td>
<td>10,696,571</td>
<td>24,609,110</td>
<td>70%</td>
</tr>
<tr>
<td>Health</td>
<td>13,316,857</td>
<td>17,406,564</td>
<td>2,512,327</td>
<td>14,894,237</td>
<td>86%</td>
</tr>
<tr>
<td>WASH</td>
<td>31,060,798</td>
<td>32,851,617</td>
<td>2,501,146</td>
<td>30,350,471</td>
<td>92%</td>
</tr>
<tr>
<td>Child protection</td>
<td>9,505,536</td>
<td>9,578,087</td>
<td>1,590,464</td>
<td>7,987,623</td>
<td>83%</td>
</tr>
<tr>
<td>Education</td>
<td>17,774,239</td>
<td>19,999,784</td>
<td>4,283,329</td>
<td>15,716,454</td>
<td>79%</td>
</tr>
<tr>
<td>Funds not allocated</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>2,543,778</td>
<td>-</td>
</tr>
<tr>
<td>Total</td>
<td>96,544,326</td>
<td>115,141,733</td>
<td>24,127,615</td>
<td>91,014,118</td>
<td>79%</td>
</tr>
</tbody>
</table>

1 Office for the Coordination of Humanitarian Affairs, ‘2018 Sudan Humanitarian Needs Overview’, OCHA 2018
2 For example, conflict-related displacement declined 10-fold in Darfur between 2016 and 2017.
3 An outbreak of acute watery diarrhoea that began in August 2016 experienced a resurgence in 2017, with more than 36,000 suspected cases and an average of 30 fatalities per week across the 18 states of the Sudan.
4 Approximately 20,000 new displaced in North and East Jebel Marra during April 2018, with an additional possible 60,000 unverified displaced in East Jebel Marra.
6 Including meningitis, measles, yellow fever and malaria.
7 New needs are continuously being identified in newly accessible areas of Jebel Marra. In Blue Nile, an intensive community mobilization campaign in newly accessible areas was conducted in November. A total of 3,101 children were screened and 441 SAM cases were identified. Many of the severely malnourished children were in critical condition and in need of inpatient care.
8 South Darfur, East Darfur, West Kordofan, South Kordofan and White Nile states.
9 As part of prevention efforts, UNICEF leads the identification of acute watery diarrhoea hotspots with high-risk factors in collaboration with the Government and partners.
10UNICEF programme targets are aligned with the 2018 Sudan HRP for all sector except for some results/indicators for health, nutrition and child protection. In view of the economic crisis the 2018 HRP is under review and revisions are expected. UNICEF will align all programmes targets with the Sudan revised HRP once published.
11Available resources pending allocations by sector, based on the needs.

Who to contact for further information:

- **Abdullah Fadil**
  - Representative - Sudan
  - Tel: +249-1831565536170
  - Email: afadil@unicef.org

- **Grant Leaty**
  - Deputy Director, Office of Emergency Programmes (EMOPS)
  - Tel: +1 212 326 7150
  - Email: gleaty@unicef.org

- **Carla Haddad Mardini**
  - Director, Public Partnership Division (PPD)
  - Tel: +1 212 326 7160
  - Email: chaddadmardini@unicef.org